

# ORDER FOR SUPPLIES OR SERVICES

(Contractor must submit four copies of invoice.)

Form Approved  
OMB No. 0704-0187  
Expires Jun 30, 1997

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Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.

PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.

SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.

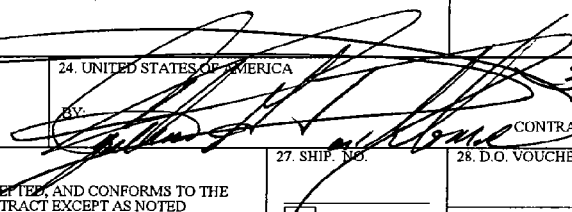
1. CONTRACT/PURCH ORDER NO. <b>DAAH23-99-G-0014</b>		2. DELIVERY ORDER NO. <b>UBT1</b>		3. DATE OF ORDER (YYMMDD) <b>2004 MAR 12</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC04026001108</b>		5. PRIORITY <b>DOC9</b>	
6. ISSUED BY Defense Supply Center Columbus 3990 E. Broad St. P.O. Box 16704 Columbus, OH 43216-5010 Local Administrator: PNNANQ (614)692-7520 / FAX: (614)692-6906 E-mail: Cynthia.Bartholemew@dla.mil				7. ADMINISTERED BY (If other than 6) DCMA PHOENIX 2 RENAISSANCE SQUARE 40 N CENTRAL AVE SUITE 400 PHOENIX, AZ 85004-4400 CRITICALITY: B		CODE <b>S0302A</b>		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)	
9. CONTRACTOR NAME AND ADDRESS MCDONNELL DOUGLAS HELICOPTER COMPAN 5000 E. MCDOWELL ROAD MESA AZ 85215-9797		CODE <b>8V613</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>210 DAYS ADO</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISAD- VANTAGED <input type="checkbox"/> WOMEN-OWNED	
14. SHIP TO See Schedule - Do Not Ship to Address in Block 6		CODE		15. PAYMENT WILL BE MADE BY HQ0339 DFAS COLUMBUS CENTER WEST ENTITLEMENT OPERATIONS P O BOX 182381 COLUMBUS OH 43218-2381 EFT: T		CODE <b>HQ0339</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER	

16. TYPE OF ORDER	DELIVERY	<input checked="" type="checkbox"/>	This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. Reference your <b>offer dated 2004 MAR 05, Ms. Nanette C. Molina</b> and furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME
	PURCHASE	<input type="checkbox"/>	

<input type="checkbox"/> NAME OF CONTRACTOR	SIGNATURE	TYPED NAME AND TITLE	DATE SIGNED (YYMMDD)
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17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  
**CG: 97X4930 SCC0 001 26.0 S33150**

18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICE	20. QUANTITY ORDERED/ACCEPTED*	21. UNIT	22. UNIT PRICE	23. AMOUNT
	<b>Remarks:</b> <b>CONFIRMING ORDER -- DO NOT DUPLICATE ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>	<b>TOTAL:</b> 1			

* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.		24. UNITED STATES OF AMERICA BY:  3/10/04		25. TOTAL	\$ 227.00
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED		27. SHIP. NO.		28. D.O. VOUCHER NO.	29. DIFFERENCE
DATE SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		31. PAYMENT <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY	30. INITIALS
36. I certify this account is correct and proper for payment. DATE SIGNATURE AND TITLE OF CERTIFYING OFFICER		33. AMOUNT VERIFIED CORRECT FOR		34. CHECK NUMBER	
37. RECEIVED AT		38. RECEIVED BY (Print)		35. BILL OF LADING NO.	
39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER	
		42. S/R VOUCHER NO.			

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## SECTION B

PR YPC04026001108

CAGE/PN 02731 7511180045

CAGE SDC NAME - ADDRESS

02731 A 5000 E MCDOWELL RD M/S MS10-A386

MESA AZ 85215-9797

## ITEM DESCRIPTION:

ITEM	PR	PLI	QUANTITY	UNIT	UNIT PRICE	AMOUNT
0001	YPC04026001108	0001	1	EA	\$227.00000	\$227.00

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: ORIGIN  
ACCEPTANCE POINT: ORIGIN

## EXCEPTION DATA:

NOTE: 3/10/04

THE BOEING COMPANY REFERENCE QUOTE NO: #04-DH-E140-04138/AOG04034#

-----  
THE BOEING COMPANY DATE OF QUOTE: MARCH 5, 2004  
-----P/N: 7-511180045-189  
-----ITEM: INSULATION BLANKET  
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COMPANY: THE BOEING COMPANY

POC: MS. NANETTE C. MOLINA

CONTRACTS AND PRICING ADMINISTRATOR

AEROSPACE SUPPORT CONTRACTS AND PRICING

E140, MC M543-D218

PHONE: 1 480 891 7542

FAX: 1 480 891 3623

EMAIL: nanette.c.molina@boeing.com  
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## NOTE 2:

THE BOEING COMPANY IS AUTHORIZED TO SHIP LESS NATIONAL STOCK NUMBER  
(NSN) IS ONE HAS NOT BEEN ASSIGNED.

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## SECTION B

PREP FOR DELIVERY

COMMERCIAL PRACTICE PPP WITH MIL-STD-129 MARKING.

DELIVERY FOB: ORIGIN BY: 2004 OCT 08

PARCEL POST ADDRESS:

W81CL8  
SR W0VC MAINT DIV PB CONT  
HOOD ARMY AIRFIELD  
BLDG 745 COBRA LOOP  
FORT HOOD TX 76544-5060

FREIGHT SHIPPING ADDRESS:

CONTACT TRANS OFF AT ADMIN OFF PRIOR TO SHIPMENT

M/F: (TCN) W912UE40151000 XXX  
RDD N01/NMCS CONTACT TRANS OFFICE AT ADMIN OFFICE PRIOR TO SHIPMENT  
PROJ TP 1  
SUP ADD W81CL8 SIG K

ADDED MARKING FOR FREIGHT SHIPPING ADDRESS:

W81CL8

FOR GOVERNMENT USE ONLY: IPD 02

DIC A05 DIST ADV 2B FC 41

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REMIT PAYMENT TO:

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